



ZONING BOARD OF APPEALS
TOWN OF WEST HARTFORD
50 SOUTH MAIN STREET
WEST HARTFORD, CT 06107-2431
TEL: (860) 561-7555 FAX: (860) 561-7504
www.westhartfordct.gov

Petition # 16-19
Fee \$ 430

ZONING APPLICATION FOR: (check one of the following)

☒ VARIANCE

☐ SPECIAL EXCEPTION

☐ APPEAL RULING OF ZONING
ENFORCEMENT OFFICER

☐ MOTOR VEHICLE DEALER/
REPAIRER LOCATION APPROVAL

LOCATION OF
PROPERTY

7 Nursery
Albany

(NEAREST CROSS STREET)

(LOT #)

(ZONING DISTRICT)

APPLICANT

Brian Dargle 107 Vandenberg Ave
(NAME) (ADDRESS) West Hartford CT 06110

860-233-4513
(TELEPHONE #)

Brian.Dargle@Comcast.net
(EMAIL)

APPLICANT'S INTEREST IN PROPERTY Owner

RECORD OWNER OF PROPERTY Brian Dargle

(Name)

(Address)

DATE OF PROPERTY ACQUIRED BY PRESENT OWNER 2017

DESCRIBE YOUR APPLICATION: Include applicable sections of the Zoning Ordinance. For applications for a VARIANCE, state legal hardship. Attach second sheet, if necessary. This application must be accompanied by the required fee, site plan(s), and any other information required by the Zoning Ordinance, or Rules of the Board.

Seeking a variance for +/- 2' to 10' Side
yard setback.

The undersigned warrants the truth of all statements contained herein and in all supporting documents to the best of his/her knowledge and belief. Furthermore, the applicant agrees that submission of this document constitutes permission and consent to Board and Staff inspections of the site. Note: Notice is hereby given the Connecticut Department of Public Health must be notified by applicants for any project located within a public water supply aquifer protection area or watershed area. (CTDPH website at <http://www.dph.state.ct.us>)

[Signature] Sept 25, 19
SIGNATURE OF PROPERTY OWNER & DATE
(Also print or type clearly)

U:\SharedDocuments\ZBA\zba-zoningapplication_March2016

[Signature] Sept 25, 19
SIGNATURE OF APPLICANT & DATE
(Also print or type clearly)

